PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10788810

CLAIMS AS FILED - PART I SMALL ENTITY OTHER												D T IIAAA
	<u>. </u>		(Column 1)		(Coli	(Column 2)		TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			63			1		RATE	FEE	<u>ה</u>	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.0	OR	BASIC FEE	+
TOTAL CHARGEABLE CLAIMS			63 minus 20=		· 43			X\$ 9=		OR	XS18=	
INDEPENDENT CLAIMS			3 n	ninus 3 = 🗍	* .			X43=	 	7	Yes	
М	ULTIPLE DEPE	NDENT CLAIM F	PRESENT			\boxtimes			 	-JOR	<u> </u>	
*	f the difference	e in column 1 is	less than 2	zero, enter	"0" in (column 2	' !	+145=	 	OR	+290=	અ૦
		•	MENDED - PART II				TOTAL	<u></u>	OR	TOTAL	1834	
		(Column 1)		(Colum	n 2)	(Column 3)	SMALL ENTIT			OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIĞHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	_	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	Minus +		=		X43=		OR	X86=	
	TINOTTILESE	LIVIATION OF IVI	JETIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL		ا ـــال	TOTAL	
		(Column 1)		(Colum	n 2\	(Column 3)	Α	DDIT. FEE	<u> </u>		ADDIT. FEE	
		CLAIMS		HIGHE	ST	(0010111113)	1 _		4001	1 1		
<u>+</u> B		REMAINING AFTER		PREVIOU		PRESENT		RATE	ADDI- TIONAL	1 1	RATE	ADDI- TIONAL
필		AMENDMENT		PAID F		EXTRA			FEE	1 1	TAIL	FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	1 5-5
AM	Independent	*	Minus	***		= .		X43=		OR	X86=	•
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		 			l~"⊦		
							L	+145=		OR	+290=	
				,			AD	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
•		(Column 1)		(Column	12)	(Column 3)	٠.					
اد	<u> </u>	CLAIMS REMAINING		HIGHES	ST	· ·		1	ADDI-			400
		AFTER		NUMBE PREVIOU		PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL
בַּ		AMENDMENT		PAID FO		EXTRA	ľ		FEE			FEE
<u> </u>	Total	*	Minus	**				X\$ 9=		OR	X\$18=	
7 H	Independent		Minus	***	1	= .		X43=			Vac	
`_	FIRȘT PRESEI	RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	X86=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											· .	
11	the "Highest Nurr	ADI	TOTAL DIT. FEE		OR .	TOTAL						
11	the "Highest Nun	nber Previously Paid per Previously Paid	d For IN THIS	S SPACE is le	es than	3 enter *3 *				. ~	ODIT. FEE L	
	<u> </u>		- COUNTY	ocpendent	, 13 (116 11	igireal number	iound	nine appi	opriate DOX	in coluf	m 1.	. 1